

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

10/713017

FILING DATE

APPLICANT(S)

AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS					
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP
1	1		1								
2	1		1								
3	1		1								
4		1		1							
5		1		1							
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TOTAL IND.	3		3								
TOTAL DEP.	9		9								
TOTAL CLAIMS	12		12								
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